

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective December 29, 1999

Application or Docket Numbr

01615104

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

| FOR                              | NUMBER FILED    | NUMBER EXTRA |
|----------------------------------|-----------------|--------------|
| BASIC FEE                        |                 |              |
| TOTAL CLAIMS                     | 12 minus 20 = * |              |
| INDEPENDENT CLAIMS               | 3 minus 3 = *   |              |
| MULTIPLE DEPENDENT CLAIM PRESENT |                 |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |   |
|--|---|-------|---|------------------|---|
|  | Total                                     | *     | Minus                                       | **               | = |
| Independent                                    | *   | Minus | ***   | =                |   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |   |

SMALL ENTITY  
TYPE

OR OTHER THAN  
SMALL ENTITY

| RATE   | FEES   | RATE     | FEES   |
|--------|--------|----------|--------|
|        | 345.00 | OR       | 690.00 |
| X\$ 9= |        | OR       | X\$18= |
| X39=   |        | OR       | X78=   |
| +130=  |        | OR       | +260=  |
| TOTAL  |        | OR TOTAL | 1070   |

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
|------------------|------------------------|---------------------|------------------------|
| X\$ 9=           |                        | OR                  | X\$18=                 |
| X39=             |                        | OR                  | X78=                   |
| +130=            |                        | OR                  | +260=                  |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |   |
|--|---|-------|---|------------------|---|
|  | Total                                     | *     | Minus                                       | **               | = |
| Independent                                    | *   | Minus | ***   | =                |   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |   |

| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
|------------------|------------------------|---------------------|------------------------|
| X\$ 9=           |                        | OR                  | X\$18=                 |
| X39=             |                        | OR                  | X78=                   |
| +130=            |                        | OR                  | +260=                  |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |   |
|--|---|-------|---|------------------|---|
|  | Total                                     | *     | Minus                                       | **               | = |
| Independent                                    | *   | Minus | ***   | =                |   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |   |

| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
|------------------|------------------------|---------------------|------------------------|
| X\$ 9=           |                        | OR                  | X\$18=                 |
| X39=             |                        | OR                  | X78=                   |
| +130=            |                        | OR                  | +260=                  |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/014104



### Total Fee Calculation

| Fee Code                | Total # Claims | Number Extra | X              | Fee     |            | =          | Total      |
|-------------------------|----------------|--------------|----------------|---------|------------|------------|------------|
|                         |                |              |                | Sm./Lg. | Sm. Entity |            |            |
| Basic Filing Fee        | <u>201/101</u> |              |                |         | <u>345</u> | <u>690</u> | <u>690</u> |
| Total Claims >20        | <u>203/103</u> | <u>12</u>    | -20 = <u>—</u> | X       | <u>9</u>   | <u>18</u>  | <u>18</u>  |
| Independent Claims >3   | <u>202/102</u> | <u>3</u>     | -3 = <u>—</u>  | X       | <u>39</u>  | <u>78</u>  | <u>78</u>  |
| Mult. Dep Claim Present | <u>204/104</u> |              |                |         | <u>130</u> | <u>260</u> | <u>260</u> |
| Surcharge               | <u>205/105</u> |              |                |         | <u>65</u>  | <u>130</u> | <u>130</u> |
| English Translation     | <u>139</u>     |              |                |         |            |            |            |

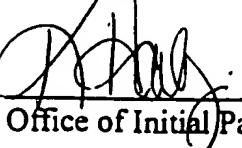
### TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 920

Less Filing Fees Submitted - \$ 0

BALANCE DUE = \$ 920

  
 Office of Initial Patent Examination